# EXPRESSION OF INTEREST FORM (FOR GUIDANCE PUPOSES ONLY)

# **Section 1: The Applicant**

Full Legal Name of Applicant (As per registration certificate)		
Address		
Office Telephone Number(s)		
Fax Number		
E-mail Address		
Web Address		
Contact Person, Title		
Contact Person, E-mail address		
Contact Person, Phone number		
Year organization was registered		
Legal status of the organization		
Registration Number		
DUNS NUMBER (if applicable)		
TPIN Number		
Organization's mission statement/purpose and primary sectors of the organization's operation	S	
We/I hereby certify that the information contained herein and attached hereto is complete and accurate to the best of our/my knowledge.		
Head of Organization/Institution	Signature	Date

## Section 2 – Letter of Interest (LOI)

Submitting a Letter of Interest (LOI) is the first phase in the grant selection process. The LOI should clearly and concisely explain the proposed grant activity's relevance, purpose, objectives, activities and expected results in support of the objectives of the Engendehealth Malawi Essential Gender Based Violence Services and Prevention Project. After evaluating LOIs, the Project will invite organizations that submitted successful LOIs to enter into a second phase of the competition by submitting a full grant application based on the concepts and technical approaches proposed in the LOI. All LOIs must not exceed 5 pages and must be submitted in the following format:

### 1. PROPOSED GRANT ACTIVITY DETAILS

Proposed Grant Activity Title:

Proposed Grant Duration (up to 24 months):

Estimated funds requested from Engenderhealth Project (in Malawi Kwacha and US\$ Equivalent):

#### 2. GRANT ACTIVITY DESCRIPTION AND PROBLEM STATEMENT

Please describe the proposed grant activity and the main problems/issues that it will address.

# 3. RELEVANCE OF THE PROPOSED GRANT ACTIVITY TO THE OBJECTIVES OF THE ENGENDERHEALTH PROJECT

Please explain how your proposed grant activity is in line with the objectives of the Engenderhealth Project.

#### 4. GRANT ACTIVITY GOAL AND OBJECTIVES

Please state the overall goal of the proposed grant activity. List the specific objectives of the grant activity that must be met in order to achieve the overall goal. It should be made clear how achieving the grant activity's goal and objectives will contribute to addressing the issues/problems listed in Section 2 above.

#### 5. PROPOSED TASKS AND ACTIVITIES

Please list and briefly describe the illustrative activities that your organization proposes to undertake to meet the objectives of the proposed grant activity.

#### 6. EXPECTED RESULTS

Please describe the expected results of the proposed grant activities and how they relate to the proposed grant activity goal and objectives. Please list anticipated and achievable results as measurable outcomes of the proposed grant activities. Each result should be directly linked to a specific objective.

#### 7. PAST EXPERIENCE

Please list your organization's past experience implementing similar activities or women's rights and GBV.

## 8. ANNEXES

Please attach a copy of your organization's Articles of Incorporation or other documentation that substantiates the legal character/registration of the organization.